

WHEREAS The Provincial Government announced on June 5, 2017 that legislation would be amended to allow paramedics to treat patients on scene and to transfer patients (divert) to facilities other than hospitals; and

WHEREAS Hospitals, paramedic ambulance services and emergency rooms are underfunded and lack capacity; and

WHEREAS Better funding for hospital, paramedic ambulance, and emergency room services is needed; and

WHEREAS We support public hospitals, community health centres and other public providers to provide a range of clinic services.

THEREFORE CACO endorses the expansion of the current practice of paramedics to allow for paramedics to treat and refer (divert) patients to other than emergency rooms in hospitals in the following circumstances:

- 1. Diversion from emergency rooms in hospitals should be only to public, not-for-profit facilities,
- 2. Diversion from emergency rooms in hospitals would be only with patient agreement,
- 3. Diversion from emergency rooms in hospitals would be only for patients with low acuity,
- 4. Continuation of diversion systems which move patients to other parts of hospitals (e.g. stemi, stroke, and trauma patients) would continue,
- 5. The expansion of community paramedicine programs would continue,
- 6. Paramedics must not be pressured to treat and refer patients inappropriately due to lack of funding for Ambulance Service or Ambulance Service capacity issues,
- 7. Paramedics and dispatchers must be protected from any additional liability that may arise from the Government's changes to allow diversion away from emergency rooms in hospitals, and
- 8. Decisions to not transport patients or to divert them from Emergency Rooms should be made only on scene and not through dispatch protocols.